

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2013-158-I

2016-52-T/2016-53-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Darryl Damon

Telephone: 843-439-4003

Address: 2230 Honeysuckle Lane
Bennettsville S.C 29512

Fax:
Other: 843-862-4827

Email: Darryl.Damon@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Application - Class A/A Restricted | <input type="checkbox"/> Request for Name Change on Certificate |
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application - Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input checked="" type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class C Stretcher Van | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Application | <input type="checkbox"/> Proposed Order |
| <input checked="" type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Publisher's Affidavit |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Response |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Return to Petition |
| <input checked="" type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Other: _____ |

RECEIVED
OCT 14 2016
PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Print Form

Reset Form

To whom it may concern

My name is Darryl Dannon, proud owner of Transcare LLC. I'm praying and hoping you can find my company worthy of reinstatement.

I lost focus while I was helping my sister readjust to being able to regain her independence. She is a recent amputee. So I've been busy helping her and her teenage daughter. When things began to stabilize I realize I was close to my due date with you guys. I tried to rush to complete everything and then the storm (matthew) hit. The agencies I needed to complete my process close down early for the week for the storm.

I was unable to complete my process before the due date.

Thanking you in advance for your cooperation
I am Darryl Dannon,

REQUEST FOR EXTENSION TO COMPLY WITH ORDER

Mail or Fax a copy of this form to: Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210 PHONE (803) 896-5100 FAX (803) 896-5199	Need Assistance with completing the Form? SC Office of Regulatory Staff Transportation Department PHONE: (803) 737-0800
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DATE: OCT 14, 2016

The S.C. Public Service Commission issued a Certificate of Public Convenience and Necessity in Order # 20B-299 dated OCT 14, 2016 for the following type of certificate:

☐ Class C Taxi
 ☐ Class C Charter
 ☐ Class C Charter Bus
 ☒ Class C Non-Emergency
☐ Class C Stretcher Van

Pursuant to that Order, the following carrier was given ninety (90) days from the date of the Order to comply with the requirements of certification.

Please consider this as a request for an extension until October 30, 2016 to allow the following carrier to come into compliance. (DATE)

EXTENSIONS ARE NOT EFFECTIVE UNTIL APPROVED BY THE PUBLIC SERVICE COMMISSION.

<u>Transcare LLC</u>	D/B/A _____
(Name of Company)	(if applicable)
<u>2230 Honey Suckle Lane</u>	_____
(Street Address)	(Mailing Address, City, State, Zip)
<u>Bennettsville S.C 29512</u>	_____
(City, State, Zip Code)	(Signature)
<u>843-439-4003</u>	_____
(Telephone Number)	(Title) Owner, President, etc.

Reason for Request for Extension to comply with PSC Order:

I had family member health issue i was dealing with and
lost focus of the due date. I was trying to complete this
by the due date then the storm came a different agency was
close. which unable to pursue my insurance in time. (ORS Rev 8-20-15)